

A 44 year-old male admitted to our hospital due to a high voltage electric shock, first chest x-ray demonstrated partial left mediastinal shift (Figure 1), an hour later respiratory distress, cough, tachypnea and hemoptysis were developed, at the same time chest x-ray and chest computed tomography demonstrated left lower lobe atelectasis, minimal left pneumothorax and complete left mediastinal shift (Figure 2, 3a, 3b). Bronchial aspiration was urgently performed with

rigid bronchoscopy, the large amounts of bloody sputum was aspirated from the left lower lobe bronchus, control chest-x ray was within normal limits after bronchoscopy and the patient was discharged uneventfully (Figure 4).

This case show us, a high voltage electric shock may cause to rapid parenchymal lung injury, frequently radio-logical assessment is important for prevent any complications that may develop.



Figure 1. Partial left mediastinal shift

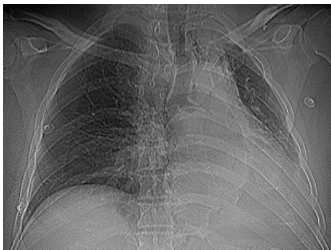


Figure 2. Left lower lobe atelectasis and complete left mediastinal shift.

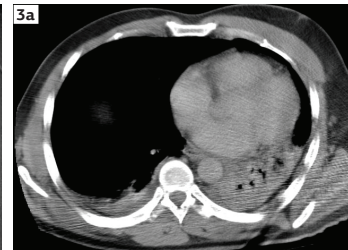


Figure 3. Left lower lobe atelectasis, minimal right pleural effusion, minimal left pneumothorax and complete left mediastinal shift (3a,3b).

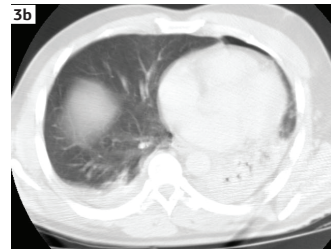


Figure 4. Chest x-ray after rigid bronchoscopy